

# *Mississippi*

## *Board of Nursing*



# *2004*

## *Annual Report*

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**MESSAGE FROM EXECUTIVE DIRECTOR**

*In compliance with the provisions of Chapter 15, 73-15-17 et seq., Mississippi Code of 1972, Annotated, the Mississippi Board of Nursing hereby submits this report to Governor Haley Barbour to outline the accomplishments of this agency for the period of July 1, 2003 through June 30, 2004.*

*The Mississippi Board of Nursing is the state regulatory agency responsible for protection of the public in matters related to nursing. During Fiscal Year 2004, as authorized by law, the Board licensed qualified applicants, administered RN and LPN licensure examinations, communicated standards of nursing practice, issued statements regarding scope of practice, consulted with individuals and agencies on nursing practice issues, and carried out disciplinary proceedings associated with violations of the Nursing Practice Law and Rules and Regulations.*

*Through the work of appointed Board members, a committee structure, and agency staff, the Board conducted essential and critical business, monitored trends related to nursing and took proactive steps to address the ever-changing needs of the citizens of Mississippi. The Board continues to be involved in nursing regulation on the local, state and national levels with Board and staff members selected to participate on committees related to research, discipline, examinations and policy development.*

*Nurses make important contributions toward meeting the health care needs of the people of Mississippi. In a constantly changing health care environment, the Board of Nursing diligently pursues its stated function of protecting the consumers of nursing care.*

*The Mississippi Board of Nursing submits the accomplishments reported herein for Fiscal Year 2004.*

*Delia Y. Owens, JD, RN  
Executive Director*

## ***BOARD MEMBERS***

Members are appointed in accordance with the Mississippi Code, Section 73-15-9. The board is composed of thirteen members including seven registered nurses, four licensed practical nurses, one consumer of health services, and one physician. Except for the physician and consumer representatives, members are appointed by the governor from lists of nominees submitted by Mississippi registered nurse and practical nurse organizations and/or associations. The physician is appointed by the State Board of Medical Licensure and the consumer representative is appointed by the governor. The following individuals served as Board members during FY 2004:

Debra Allen, RN  
Delores Barlow, RN  
Mary Ann Bearman, Consumer  
Bess C. Blackwell, RN  
Dr. Dewitt Crawford, Physician  
Sonja Fuqua, RN  
Margaret Heath, RN  
Tina Mabry RN, RN, FNP  
Emily Pharr, LPN  
Brenda Reed, LPN  
Gary Dwayne Self, RN, CRNA  
Rosie Tallie, LPN  
Cathy Walker, LPN

The following individuals were appointed to fill expired turns during FY 2004:

Darlene Lindsey, RN  
Tina Mabry, RN, FNP  
Becky Nelms-Currie, RN  
Gary Dwayne Self, RN, CRNA  
Dr. Dwaila South, Physician  
Cathy Williamson, RN, CNM

## ***COMMITTEES***

Board of Nursing committees are comprised of Board members and staff to assist in the assessment, planning, implementation, and evaluation of Board activities. Committee members are appointed by the president in accordance with bylaws except members of the Nominating Committee who are elected by the Board. Board committees, members, and purpose during FY 2004 were as follows:

**Compliance Committee:** Monitors and makes recommendations related to individuals whose licenses have been restricted by Board order.

Bess C. Blackwell, RN, Chair  
Mary Ann Bearman, Consumer  
Brenda Reed, LPN  
Gary Dwayne Self, RN, CRNA

**Executive Committee:** Supervises affairs of the Board between business meetings; evaluates Board activities in terms of purpose, goals and objectives; reviews and resolves complaints relative to Board members; works with the executive director and accountant in preparing the annual budget; and presents annual and quarterly budget reports to the Board.

Delores Barlow, RN, President  
Sonja Fuqua, RN, Secretary  
Emily Pharr, LPN, Treasurer

**Nominating Committee:** Submits slate of names for offices to be filled at annual meeting.

Bess Blackwell, RN  
Debra Allen, RN  
Rosie Tallie, LPN

**Expanded Role Committee:** Considers and prepares recommendations related to the expanded role of the RN and the expanded role of the LPN.

Tina Mabry, RN, FNP, Chair  
Dr. Dewitt Crawford, Physician  
Rosie Tallie, LPN

**Nurse Practice Committee:** Responds to written inquiries regarding scope of nursing practice.

Debra Allen, RN, Chair  
Margaret Heath, RN  
Cathy Walker, LPN

## ***STAFF***

### **ADMINISTRATION**

Delia Y. Owens, RN, JD, Executive Director  
Nancy Herrin, Administrative Secretary

### **DISCIPLINE**

Laura Henderson-Courtney, Senior Attorney  
Vanessa Gray, Legal Secretary  
Sunni Sanger, Legal Secretary

### **INVESTIGATIONS**

Ann Ricks, RN, Director  
Dwayne Jamison, Chief Investigator  
Steve Dye, Investigator  
David Elson, Investigator  
Betty Martin, Investigator  
Jane Phillips, Investigator  
Adelia Bush, Legal Secretary

### **LICENSURE AND PRACTICE**

Sheree Zbylot, RN, Director  
Sontyna Dixon, Licensing Officer  
Sherron Fair, Licensing Officer  
Carolyn Owens, Licensing Officer  
Barbara Robison, Licensing Officer  
Gloria Perry, Licensing Officer

### **RECOVERING NURSE PROGRAM**

Jane Tallant, RN, Director  
Tony Graham, Monitoring Counselor  
Marianne Wynn, Monitoring Counselor  
Marvia Davis, Compliance Officer  
Sarah Thurman, Executive Secretary

### **FINANCE AND TECHNOLOGY**

James Mack, Director  
Freddie Tolliver, Accountant/Auditor  
Dan Patterson, Systems Analyst

## **BUDGET**

Nursing licenses expire on December 31 of each year with RN licenses expiring in even numbered years and LPN licenses expiring in odd numbered years. Thus, the vast majority of the Board's income is received during the renewal period from October to December of each year. Because there are approximately two-thirds more RNs than LPNs, as a general rule, the Board of Nursing's income in even numbered years must fund at least one and one half fiscal year.

<b>RENEWAL YEAR</b>	<b>APPROPRIATED</b>	<b>ACTUAL EXPENSES</b>	<b>RECEIPTS</b>
FY03 - RNs	\$ 1,551,000	\$ 1,523,046	\$ 2,092,007
FY04 - LPNs	\$ 1,552,945	\$ 992,127	\$ 1,144,060

Actual expenses were not as budgeted due to various staff positions being vacant throughout FY 2004 and, among other things, restrictions not allowing agencies to receive a list of eligibles and/or to begin interviews until after the employee vacating the position has worked their last day and restrictions requiring that start dates for new employees be the 1<sup>st</sup> and 15<sup>th</sup> of the month.

## **LICENSURE**

The Mississippi Board of Nursing assisted qualified applicants in obtaining licensure to practice nursing in Mississippi by granting licensure to registered nurses and practical nurses in the following categories:

- Candidates who achieved a passing score on the National Council Licensure Examination (NCLEX®);
- Licensees who met the qualifications for renewal of active licensure;
- Nurses who were endorsed into Mississippi from another state in which they were originally licensed;
- Nurses who applied for inactive licensure; and
- Nurses whose Mississippi licenses were reinstated following a period of lapsed, revoked, or suspended licensure.

All licensing, renewal, examination and certification activities were planned, coordinated and implemented by licensing officers and their supervisory personnel. During FY 2004, licensing officers were directly involved in approximately 6,700 licensure activities or services.

### **Active Status**

As of June 30, 2004, there were 32,579 RNs and 11,759 LPNs with licensure. Active licensure means the practice of nursing as defined in the Nursing Practice Law, Section 73-15-5 (2) and (3), which states:

"The practice of nursing by a registered nurse means the performance for compensation of services which require substantial knowledge of the biological, physical, behavioral, psychological and sociological sciences and of nursing theory as the basis for assessment, diagnosis, planning, intervention and evaluation in the

promotion and maintenance of health; management of individuals' responses to illness, injury or infirmity; the restoration of optimum function; or the achievement of a dignified death. Nursing practice includes, but is not limited to, administration, teaching, counseling, delegation and supervision of nursing, and execution of the medical regimen, including the administration of medications and treatments prescribed by any licensed or legally authorized physician or dentist. The foregoing shall not be deemed to include acts of medical diagnosis or prescriptions of medical, therapeutic or corrective measures, except as may be set forth by rules and regulations promulgated jointly by the State Board of Medical Licensure and the Mississippi Board of Nursing and implemented by the Mississippi Board of Nursing."

"The practice of nursing by a licensed practical nurse means the performance for compensation of services requiring basic knowledge of the biological, physical, behavioral, psychological and sociological sciences and of nursing procedures which do not require the substantial skill, judgment and knowledge required of a registered nurse. These services are performed under the direction of a registered nurse or a licensed physician or licensed dentist and utilize standardized procedures in the observation and care of the ill, injured and infirm; in the maintenance of health; in action to safeguard life and health; and in the administration of medications and treatments prescribed by any licensed physician or licensed dentist authorized by state law to prescribe. On a selected basis, and within safe limits, the role of the licensed practical nurse shall be expanded by the Board under its rule-making authority to more complex procedures and settings commensurate with additional preparation and experience."

The license to practice as a registered nurse is valid for two calendar years, beginning January 1 of each uneven-numbered year and expiring December 31 in each even-numbered year. The license to practice as a licensed practical nurse is valid for two calendar years, beginning January 1 of each even-numbered year and expiring December 31 in each uneven-numbered year.

Table 1 indicates the number of registered nurses and licensed practical nurses holding active licensure for the last five years and the percentage change from each previous year. In FY 2004, there was a 4.6% increase in the number of active licensees over FY 2003, including an 8% increase in RNs and a 3.8% decrease in LPNs.

**Table 1: Active Licensees**

<b>LICENSEES</b>	<b>FY00</b>	<b>FY01</b>	<b>FY02</b>	<b>FY03</b>	<b>FY04</b>
<b>Registered Nurses</b>	29,630	28,437	30,592	30,157	32,579
<b>Licensed Practical Nurses</b>	11,315	12,243	11,250	12,223	11,759
<b>Total</b>	40,945	40,680	41,842	42,380	44,338
<b>Percentage Change from Previous Year</b>	+3.5%	-0.6%	+2.9%	+1.3%	+4.6%

### **Inactive Status**

The Nursing Practice Law permits the issuance of an inactive license, at the discretion of the Board, to persons not engaged in the active practice of nursing but desiring to maintain licensure. A nurse holding an inactive license continues to receive all information from the Board, but is not authorized to practice in Mississippi as a RN or LPN based on that inactive status.

Table 2 depicts the number of RNs and LPNs who have held inactive licensure during the last five years and the percentage change from each previous year. There

has been a 27% increase in the number of inactive licensees since FY 2000, including a 60% increase in the number of inactive RNs and a 23.2% decrease in the number of inactive LPNs.

**Table 2: Inactive Licensees**

LICENSEES	FY00	FY01	FY02	FY03	FY04
<b>Registered Nurses</b>	1,241	1,699	1,625	1,495	1,991
<b>Practical Nurses</b>	845	811	752	714	649
<b>Total</b>	2,086	2,510	2,377	2,209	2640
<b>Percentage Change from Previous Year</b>	- 1.8%	+20.3%	-5.3%	-7.07%	+20%

### **Nurse Practitioners**

As authorized by Mississippi Code of 1972, Annotated, Section 73-15-5 (2), the Board of Nursing provides for certification of nurse practitioners. Regulations are in place to facilitate implementation of the statute, including regulations jointly promulgated by the State Board of Medical Licensure and the Mississippi Board of Nursing.

Table 3 depicts those nurse practitioners who were initially certified during FY 2004 and the total certified as of June 30, 2004. The total number of currently certified nurse practitioners represents a 12% increase over last year, a 32% increase over FY 2000.

**Table 3: Type and Number of Nurse Practitioners**

TYPE OF NURSE PRACTITIONERS	FY04 (NEW)	TOTAL (FY04)
<b>Adult</b>	3	51
<b>Adult Acute Care</b>	8	45
<b>Adult Psychiatric Mental Health</b>	4	26
<b>Anesthetist</b>	64	523
<b>Family</b>	78	821
<b>Family Planning</b>	0	6
<b>Family Psychiatric Mental Health</b>	4	16
<b>Gerontological</b>	2	15
<b>Midwife-Certified</b>	3	30
<b>Neonatal</b>	3	30
<b>OB-GYN</b>	0	19
<b>Pediatric</b>	1	29
<b>Woman's Health Care</b>	2	32
<b>Total</b>	172	1,643

Other licensure activities related to nurse practitioners during FY 2004 included the issuance of 31 temporary certifications, 33 reinstatements, 133 interviews with newly certified practitioners, approval of 1726 practice sites, and 499 responses to practice questions.

### **LPN Expanded Role Certification**

The role of the licensed practical nurse may be expanded by the Board under its rule-making authority to include selected procedures commensurate with required preparation and experience. Under specific Board-approved guidelines, the LPN may be certified in the expanded roles of intravenous therapy and hemodialysis.

Table 4 depicts those LPNs who were initially certified during FY 2004 and the total certified as of June 30, 2004. The total number of LPNs certified in an expanded role is a 9% decrease from last year, and a 21.3% increase over FY 2000. Of the LPNs holding an active license, 18.2% were certified in an expanded role in FY 2004 compared to 16% in FY 2000.

**Table 4: Type and Number of Expanded Role LPNs**

<b>TYPE OF LPN EXPANDED ROLE</b>	<b>FY04 (NEW)</b>	<b>TOTAL (AS OF 6/30/04)</b>
<b>IV Therapy</b>	293	2,003
<b>Hemodialysis</b>	26	143
<b>Total</b>	319	2,146

### **Reinstatements**

Reinstatement refers to the reactivation of licensure to those nurses who were previously licensed in Mississippi but whose licenses have lapsed. These individuals must apply and meet all requirements for reinstatement of a nursing license. In FY 2004, 455 registered nurses and 518 licensed practical nurses reinstated licensure after a period of lapsed status.

### **Endorsements**

The Board may issue a license to practice nursing as a registered nurse or licensed practical nurse without examination to an applicant who has been duly licensed as such under the laws of another state, territory or possession of the United States, the District of Columbia, or a foreign country if the applicant meets the qualifications required of licensed RNs or LPNs in this state. The nurse must have previously achieved the passing score or scores on the licensing examination required by Mississippi at the time of his or her graduation. During FY 2004, 1,316 RNs and 274 LPNs were endorsed into Mississippi an increase of 69% over FY 2003. As depicted in Table 5, over 68% of nurses endorsing into Mississippi were originally licensed in Alabama, Louisiana and Tennessee.



**Table 5: Endorsements into Mississippi - FY 2004**

<b>STATE</b>	<b>RNs</b>	<b>LPNs</b>	<b>STATE</b>	<b>RNs</b>	<b>LPNs</b>
Alabama	143	56	Nebraska	1	0
Alaska	1	0	Nevada	0	0
Arizona	6	0	New Hampshire	6	0
Arkansas	30	9	New Jersey	5	0
California	17	3	New Mexico	0	0
Colorado	13	2	New York	17	6
Connecticut	1	0	North Carolina	14	2
Delaware	0	0	North Dakota	2	0
District of Columbia	1	0	Ohio	0	5
Florida	29	10	Oklahoma	9	1
Georgia	25	8	Oregon	2	0
Hawaii	2	0	Pennsylvania	21	1
Idaho	0	0	Rhode Island	2	0
Illinois	23	10	South Carolina	13	2
Indiana	11	2	South Dakota	3	1
Iowa	7	1	Tennessee	578	63
Kansas	8	2	Texas	39	15
Kentucky	11	2	Utah	1	0
Louisiana	194	53	Vermont	0	0
Maine	0	0	Virginia	23	4
Maryland	5	1	Washington	5	0
Massachusetts	8	1	West Virginia	6	0
Michigan	8	5	Wisconsin	5	2
Minnesota	3	1	Wyoming	2	0
Missouri	15	6	Other Territories	1	0
Montana	0	0	Total	1316	274

The Interstate Nurse Licensure Compact that went into effect in Mississippi on July 1, 2001, will continue to alter endorsement activities. Nurses who reside in another compact state who wish to practice in Mississippi have been given the privilege to practice rather than going through the endorsement process for a license. As of June 30, 2004, 20 states have adopted the compact, with 3 of these having implementation dates on or after January 1, 2005. In addition to Mississippi, the following states are members: Arizona, Arkansas, Delaware, Idaho, Indiana, Iowa, Maine, Maryland, Nebraska, New Jersey, New Mexico, North Carolina, North Dakota, South Dakota, Tennessee, Texas, Utah, Virginia and Wisconsin. In FY 2004, these 19 states accounted for 51.4% of endorsement applicants; however, two states, Tennessee and Texas, accounted for 44% of all endorsement applicants and only two states, Arkansas and Tennessee, actually share borders with Mississippi. It is anticipated that the compact will not lead to a significant decrease in the number of endorsement applicants until additional border-states adopt the compact.

## **Verifications**

The Board provides verification of licensure status, including state board examination results and educational preparation, for registered nurses and licensed practical nurses who are seeking licensure in other states, territories or countries. During FY 2004, the licensure status of 1214 registered nurses and 245 licensed practical nurses was verified to other jurisdictions. In FY 2004, there was a 60% decrease in verifications to other states compared to FY 2003. This decrease was due in part to the Board joining the national automated verification system thus decreasing the need for written verifications to some states. Exceptions are related to disciplinary cases, special situations, and non-licensure related verifications. As a result of recently passed administrative law/rules and regulations requiring health care providers to obtain disciplinary information on employees, verifications are expected to increase sharply over the next few years. Table 6 depicts the jurisdictions to which verification was provided.

**Table 6: Verifications from Mississippi - FY 2004**

<b>STATE</b>	<b>RNs</b>	<b>LPNs</b>	<b>STATE</b>	<b>RNs</b>	<b>LPNs</b>
Alabama	94	18	Nebraska	0	0
Alaska	6	2	Nevada	58	1
Arizona	5	2	New Hampshire	1	1
Arkansas	14	4	New Jersey	32	0
California	148	20	New Mexico	9	0
Colorado	20	4	New York	34	4
Connecticut	7	5	North Carolina	28	2
Delaware	1	0	North Dakota	0	0
District of Columbia	34	0	Ohio	27	3
Florida	72	18	Oklahoma	17	3
Georgia	53	19	Oregon	12	8
Hawaii	11	1	Pennsylvania	32	3
Idaho	0	0	Rhode Island	11	3
Illinois	21	9	South Carolina	16	4
Indiana	9	0	South Dakota	1	0
Iowa	0	0	Tennessee	51	16
Kansas	7	0	Texas	43	19
Kentucky	6	0	Utah	0	1
Louisiana	120	51	Vermont	2	0
Maine	0	0	Virginia	29	4
Maryland	2	1	Washington	13	2
Massachusetts	13	4	West Virginia	13	0
Michigan	17	1	Wisconsin	3	2
Minnesota	12	0	Wyoming	4	0
Missouri	10	1	Other	94	9
Montana	2	0	Total	1214	245

### **Temporary Permits/Certifications**

Temporary permits to practice nursing may be issued to endorsement applicants for a period of 90 days; camp nurses for a period of 90 days, and nurses enrolled in reorientation programs for a period of 30 days. Temporary certification may be issued to advanced practice nurses seeking endorsement from other states. A total of 892 temporary permits/certifications were issued in FY 2004 as listed in Table 7. This figure has remained relatively stable over the past several years.

**Table 7: Temporary Permits/Certifications**

ACTIVITY	RNs	LPNs	TOTAL FY03	TOTAL FY04
Endorsement	635	204	687	839
Reorientation	8	6	13	14
Camp	8	0	15	8
Advanced Practice	31	NA	27	31
Total	682	210	742	892

### **Records Maintenance**

Mississippi Board of Nursing staff members engaged in a variety of activities required to maintain the most accurate licensure files possible. In addition to changes made during renewal time, the following activities were performed in FY 2004:

**Table 8: Records Maintenance**

ACTIVITY	FY03	FY04
Name Changes	382	319
Address Changes	1436	1085
Transcripts Issued	47	32
Licensure Certificates Issued	292	278
Duplicate Licenses Issued	501	650

## ***PRACTICE AND STANDARDS***

Standards of practice for registered nurses and licensed practical nurses in a variety of clinical/educational roles were reviewed and recommendations for implementation were made by the Board. Staff is available to individual nurses as well as health related agencies throughout Mississippi regarding issues of nursing roles, scope of practice and practice standards and assists the Board of Nursing investigative staff by reviewing evidence and/or cases related to generally accepted standards of nursing practice.

Information and resources were studied by staff and the Nurse Practice Committee of the Board in order for decisions to be made regarding issues/questions involving nursing practice standards and scope of practice. The Board was contacted by individual nurses, nursing directors, administrators and employers of nurses for specific nurse practice information. In FY 2004, 317 written responses were mailed and an

additional 1413 verbal responses were provided to callers having nursing practice inquiries and 499 verbal responses were provided to callers having advanced practice nursing inquiries.

## **EXAMINATIONS**

The Board of Nursing is a consumer protection agency with the authority to regulate the practice of nursing through licensure and is responsible for examining the competency of persons entering the nursing profession through the administration of valid and reliable licensure examinations.

The Board is a member of the National Council of State Boards of Nursing (NCSBN). Under the guidance and with the participation of its member boards, NCSBN has developed psychometrically sound and legally defensible licensure examinations to measure the competencies needed to perform safely and effectively as an entry-level registered nurse or licensed practical nurse. The National Council Licensure Examination® (NCLEX®) is administered via computerized adaptive testing.

The Board is responsible for the administration of licensure examinations to graduates of registered and practical nursing programs. This testing program includes the administrative duties of determining candidate qualifications, processing applications for examination, securing qualified readers for disabled candidates in accordance with the Americans with Disabilities Act, soliciting and approving volunteer item writers and item reviewers, working closely with the national testing service and the local testing centers, evaluating and monitoring test sites, adhering to strict security measures, and receiving, processing and reporting examination results to individual candidates, schools of nursing, the State Department of Education and the State Board of Institutions of Higher Learning.

Licensure examinations are administered year-round in special testing centers equipped for computerized adaptive testing. This testing methodology allows candidates to schedule at their convenience at any of over 200 sites throughout the country, to receive results within two weeks of the examination. Mississippi has sites located in Jackson and Tupelo. Candidates may take the examination eight times in a one year period.

The Board of Nursing continued to be involved in the selection process of nurses from Mississippi who are nominated to participate in the development of quality licensure examinations for registered nurses and licensed practical nurses.

Mississippi's system of vocational and higher education provides education opportunities for potential nursing students throughout the state. Mississippi programs preparing licensed practical nurses are regulated and approved by the Community College Board pursuant to a contractual agreement with the Mississippi Department of Education. Mississippi programs preparing registered nurses are regulated and approved by the State Board of Institutions of Higher Learning.

Tables 9 and 10 include only those graduates of Mississippi schools of registered nursing and practical nursing who took the examination in FY 2004 or in the previous four years for the first time, regardless of where they initially applied for licensure. Compared to FY 2000, there was an 18.1% increase in Mississippi RN graduates taking the examination for the first time; however, there was a 3.6% decrease compared to FY 2003. Compared to FY 2000, there was a 4.8% increase in Mississippi LPN graduates taking the examination for the first time, and compared to FY 2003, there was an 8.7%

increase. The LPN pass rate increased from 78% in FY 2000 and 84% in FY 2003, to an 89% pass rate in FY 2004.

**Table 9: Mississippi RN Graduate First Writes**

YEAR	TOTAL NUMBER WRITING	PASSING		FAILING	
		NUMBER	PERCENT	NUMBER	PERCENT
FY00	1047	918	88%	129	12%
FY01	820	691	84%	129	16%
FY02	961	827	86%	134	14%
FY03	1282	1123	88%	159	12%
FY04	1236	1060	86%	176	14%

**Table 10: Mississippi LPN Graduate First Writes**

YEAR	TOTAL NUMBER WRITING	PASSING		FAILING	
		NUMBER	PERCENT	NUMBER	PERCENT
FY00	587	455	78%	132	22%
FY01	527	443	84%	84	16%
FY02	506	401	79%	105	21%
FY03	566	478	84%	88	16%
FY04	615	549	89%	66	11%

Tables 11 and 12 describe all RN and LPN candidates who applied for licensure by examination in Mississippi (including first-time and repeat applicants) regardless of where they were educated.

**Table 11: Registered Nurse Licensure Examination Statistics  
First-Time and Repeat Candidates**

YEAR	TOTAL NUMBER EXAMS ADMINISTERED	PASSING		FAILING	
		NUMBER	PERCENT	NUMBER	PERCENT
FY00	1533	1207	79%	326	21%
FY01	1368	1016	74%	352	26%
FY02	1418	1088	77%	330	23%
FY03	1439	1141	79%	298	21%
FY04	1573	1263	80%	310	20%

**Table 12: Licensed Practical Nurse Licensure Examination Statistics  
First-Time and Repeat Candidates**

YEAR	TOTAL NUMBER EXAMS ADMINISTERED	PASSING		FAILING	
		NUMBER	PERCENT	NUMBER	PERCENT
FY00	805	536	67%	269	33%
FY01	741	529	71%	212	29%
FY02	704	477	68%	227	32%
FY03	786	570	73%	216	27%
FY04	809	631	78%	178	22%

Table 13 represents examination results for those LPN graduates who took the licensure examination during FY 2004. Table 15 also reports examination results for candidates who completed an out-of-state LPN program and for candidates who completed a registered nurse education program (foreign or domestic).

**Table 13: Practical Nurse Examinations - FY04**

<b>PRACTICAL NURSE PROGRAMS</b>	<b>FIRST WRITES</b>			<b>REPEATS</b>		
	<b>Number Tested</b>	<b>Number Passed</b>	<b>Percent Passed</b>	<b>Number Tested</b>	<b>Number Passed</b>	<b>Percent Passed</b>
Coahoma Community College	5	3	60	7	2	29
Copiah Lincoln Community College	20	20	100	0	0	0
East Central Community College	19	18	95	1	0	0
East Mississippi Community College	29	28	97	8	2	25
Hinds Community College	70	59	84	32	12	38
Holmes Community College	45	41	91	9	3	33
Itawamba Community College	30	26	87	8	4	50
Jones County Junior College	65	61	94	20	9	45
Meridian Community College	45	42	93	16	10	63
Mississippi Delta Community College	34	29	85	7	5	71
MS Gulf Coast Community College	57	51	89	18	7	39
Northeast MS Community College	29	27	93	3	1	33
Northwest MS Community College	86	74	86	28	7	25
Pearl River Community College	43	34	79	10	5	50
Southwest MS Community College	18	17	94	2	0	0
<b>Sub-Total</b>	595	530	89	169	67	40
Out-of-State Programs	17	17	100	19	11	58
Graduates of RN Programs	3	3	100	19	11	58
Graduates of Foreign Programs	3	3	100	0	0	0
<b>Sub-Total</b>	4	3	75	1	0	0
<b>TOTAL</b>	619	553	89	190	78	32

Table 14 represents examination results for those RN graduates who took the licensure examination during FY 2004.

**Table 14: Registered Nurse Examinations - FY04**

SCHOOLS OF NURSING	FIRST WRITES			REPEATS		
	Number Tested	Number Passed	Percent Passed	Number Tested	Number Passed	Percent Passed
<b>Associate Degree Programs</b>						
Alcorn State University	30	25	83	6	4	67
Copiah Lincoln Community College	24	20	83	3	2	67
East Central Community College	37	33	89	12	1	8
Hinds Community College	93	83	89	15	10	67
Holmes Community College	39	32	82	6	4	67
Itawamba Community College	57	47	82	35	22	63
Jones County Junior College	43	41	95	2	2	100
Meridian Community College	103	94	91	21	13	62
Mississippi Delta Community College	36	35	97	3	3	100
MS Gulf Coast Comm. Coll. Jackson County	54	47	87	11	5	45
MS Gulf Coast Comm. Coll. Jeff Davis	60	53	88	11	6	55
Mississippi University for Women	42	32	76	11	8	73
Northeast MS Community College	59	50	85	8	1	13
Northwest MS Community College	65	56	86	10	5	50
Pearl River Community College	42	36	86	7	6	86
Southwest MS Community College	47	41	87	1	1	100
<b>Sub-Total</b>	831	725	87	162	93	57
<b>Baccalaureate Programs</b>						
Alcorn State University	17	16	94	2	0	0
Delta State University	11	8	73	1	1	100
Mississippi College	26	26	100	9	2	22
Mississippi University for Women	34	28	82	10	8	80
University of Mississippi Medical Center	67	59	88	4	3	75
University of Southern Mississippi	79	63	87	33	20	61
William Carey College	16	13	81	3	3	100
<b>Sub-Total</b>	250	213	85	62	37	60
<b>Other</b>						
Out-of-State Programs	138	121	88	66	30	45
Foreign Programs	41	35	85	22	9	41
Closed Programs	1	0	0	0	0	0
<b>Sub-Total</b>	180	156	87	88	39	44
<b>TOTAL</b>	1261	1094	87	312	169	54

## **INVESTIGATIONS - DISCIPLINE - COMPLIANCE**

Investigations of alleged violations of the Nursing Practice Law were carried out by Board staff, and disciplinary hearings were conducted by the Board when investigations provided evidence of violations of the Nursing Practice Law and when agreed orders were rejected by the nurse. Table 15 compares FY 2004 investigative and disciplinary statistics with those of FY 2003.

**Table 15: Comparison of FY 2003 and FY 2004 Investigative and Disciplinary Statistics**

<b>ACTIVITY</b>	<b>FY03</b>	<b>FY04</b>	<b>PERCENTAGE CHANGE</b>
<b>Allegations Received</b>	838	1,003	+19.7%
<b>Investigations Completed</b>	649	806	+24%
<b>Referred for Action</b>	215	268	+24.7%
<b>Investigations Closed</b>	434	538	+24%
<b>Total Disciplinary Actions</b>	299	432	+44.5%
<b>Formal Hearings</b>	55	63	+14.5%
<b>Agreed Orders</b>	143	228	+59.4%
<b>Administrative Denials</b>	5	24	+380%
<b>RNP Admissions</b>	60	96	+60%
<b>RNP Relapse Admissions</b>	20	11	-45%
<b>Lapsed Reinstatements (WOL)</b>	16	10	-37.5%

The Board of Nursing staff monitored all agreements resulting from disciplinary restriction of licenses. Restricted licensees were required to submit numerous monthly reports to provide documentation of compliance with Board orders. In FY 2004, an average of 96 restricted licensees was monitored monthly. An additional 64 revoked licensees submitted monthly documentation in anticipation of a reinstatement hearing at some future date.

The Board of Nursing continued to participate in the National Disciplinary Data Bank of the National Council of State Boards of Nursing. The data bank facilitates communication of disciplinary actions regarding licensed nurses among state boards of nursing. It is common for nurses to be licensed in more than one state. Therefore, a central informational system is necessary to assure that disciplinary action taken in one state is known to other states in which a nurse is or may be practicing. This system allows for maximum public protection. With implementation of the Interstate Nurse Licensure Compact on July 1, 2001, the Board is able to share current significant investigative information with other compact states. This will facilitates public protection.

The Healthcare Integrity Protection Data Bank (HIPDB) was established under Section 1128E of the Social Security Act as added by Section 221A of the Health Insurance Portability and Accountability Act of 1996. HIPDB requires that all licensure actions be reported within a specified time frame and that the report include specified elements. The Board continues to adapt internal procedures for future reporting as the federal government makes revisions to the reporting requirements.



## ***RECOVERING NURSE PROGRAM***

The Recovering Nurse Program (RNP) was developed to protect the consumers of nursing care through a special program for nurses recovering from drug dependence and/or physical, mental or emotional disability that rendered the individual unsafe to practice. This program was developed to enable nurses to maintain licensure while receiving treatment and aftercare and being closely monitored by the Board through a structured consent agreement. Nurses acknowledge violation of the law and voluntarily enter into a contractual probation agreement with the Board to restrict licensure in lieu of a formal disciplinary hearing before the Board. As of June 30, 2004, 229 participants were enrolled in the program, an increase of 40.5% over FY 2003. Since the program's inception, 804 individual nurses have participated in the program.

Nurses in the Recovering Nurse Program are allowed to practice nursing in highly supervised settings, and are closely monitored through a system of written monthly and quarterly progress reports from the program participant, the treatment/aftercare team and the employer. All participants are required to furnish random drug screens as well as verification of required attendance at drug rehabilitation support groups such as Alcoholics Anonymous or Narcotics Anonymous. Additionally, the RNP staff conducts regular and frequent conferences with each participant and makes site visits to employment and treatment settings as needed.

**Table 16: Recovering Nurse Program Activities**

<b>ACTIVITY</b>	<b>FY03</b>	<b>FY04</b>	<b>PERCENTAGE CHANGE</b>
<b>Monthly Appointments</b>	578	849	+47%
<b>Signed Affidavits</b>	60	96	+60%
<b>Signed Readmission Affidavits</b>	20	11	-45%
<b>Completed RNP</b>	24	26	+8.3%
<b>Signed Compliance Affidavits</b>	NA	7	NA
<b>Number in RNP During Fiscal Year</b>	211	279	+32.2%
<b>Number in RNP at End of Fiscal Year</b>	163	229	+40.5
<b>Admits Per 1000 Active Nurses</b>	1.42%	2.2%	+54.9%

## ***INTERSTATE LICENSURE COMPACT***

Nurses who reside in another compact state who wish to practice in Mississippi will be given the privilege to practice rather than going through the endorsement process for a license. The general purposes of this compact are to:

- Facilitate the states' responsibility to protect the public's health and safety;
- Ensure and encourage the cooperation of states in the areas of nurse licensure and regulation;
- Facilitate the exchange of information between states in the areas of nurse regulation, investigation and adverse actions;

- Promote compliance with the laws governing the practice of nursing in each jurisdiction;
- Invest all states with the authority to hold a nurse accountable for meeting all state practice laws in the state in which the patient is located at the time care is rendered through the mutual recognition of state licenses.

## ***NATIONAL COUNCIL OF STATE BOARDS OF NURSING***

The Mississippi Board of Nursing continued to be active in the National Council of State Boards of Nursing (NCSBN). The mission of NCSBN is to promote public policy related to safe and effective practice of nursing in the interest of public welfare. It strives to accomplish this mission by acting in accordance with the decision of its member boards of nursing on matters of common interest and concern affecting the public health, safety and welfare. To accomplish its aims, NCSBN provides services and guidance to its members in performing their functions that regulate entry to nursing practice, continuing safe nursing practice, and nursing education programs.

In addition to the licensure examinations (NCLEX-RN® and NCLEX-PN®) NCSBN also assisted the Board of Nursing by providing services, research, and data in the areas of licensure, standards of practice, discipline, federal regulations, foreign-educated nurses, chemical dependency, nursing education and other regulatory and education issues.

The Board of Nursing contracts with NCSBN to assist the Board in meeting HIPDB reporting requirements.

In FY 2004, Board members and staff participated in NCSBN activities as follows:

- Board Members Sonja Fuqua and Emily Pharr and staff member Delia Owens attended the August 2003 NCSBN Delegate Assembly in Alexandria, Virginia.
- Board Members Tina Mabry and Rosie Tallie and staff member Delia Owens attended the March 2004 NCSBN Mid-Year Meeting in Chicago.
- Staff member Delia Owens attended the April 2004 NCSBN Executive Officer Leadership Seminar in Laguna Beach, California. (The Board of Nursing did not finance Ms. Owens attendance at this meeting.)

## ***LIAISON AND INTER-AGENCY ACTIVITIES***

Staff members presented a variety of educational sessions to over 3,500 individuals throughout Mississippi regarding the Board of Nursing, the Nursing Practice Law, nursing practice issues and chemical dependence among health professionals. Staff members assisted local, state and federal agencies in investigations of or related to nurses. They also represented the Board on committees and at meetings of other state and national agencies and organizations including the following:

- Mississippi Nurses Association
- Institutions of Higher Learning (Council of Deans and Directors)
- Nursing Organization Liaison Committee
- Department of Health (Bioterrorism Preparedness and Response Program Advisory Committee)

- Office of Nursing Workforce (Advisory Committee)
- Office of Nursing Workforce (Barriers to Nursing Education Task Force)
- National Council of State Boards of Nursing (Practice Breakdown Research Task Force)
- Theta Beta Chapter of Sigma Theta Tau International Honor Society (Board of Directors)
- University of Mississippi School of Nursing (Adjunct Faculty)
- Mississippi Bar Association

## **OFFICE OF NURSING WORKFORCE**

In 1996, the Mississippi legislature passed the Nursing Workforce Redevelopment Act, which established the Mississippi Office of Nursing Workforce (ONW), under the auspices of the Mississippi Board of Nursing, for the purpose of addressing changes impacting the nursing workforce. ONW identified two major objectives: (1) Develop and implement a systematic annual survey for nursing manpower needs and projections; and (2) Develop a competency model to assist students in articulation and mobility within the multi-level nursing education system. The foundational philosophy for the ONW initiative is the belief that the health and welfare of the people of Mississippi are highly reliant on a competent nursing workforce, and that successful workforce development is dependent on each component of Mississippi's conceptual model.

ONW has completed its sixth year of nursing workforce data analysis from surveys sent to hospitals, home health agencies, and aging and adult services. A full report is submitted to the Mississippi State Department of Health for inclusion in the State Health Plan, which includes nursing vacancy, increase in demand, and turnover data. Additionally, ONW reports 100% participation of Mississippi schools of nursing with the Southeast Regional Education Board (SREB) School of Nursing survey, which includes faculty and student data. ONW compiles the data from the SREB survey and the reports are provided to the Mississippi Council of Deans and Directors of Schools of Nursing annually. Data excerpts from both of these surveys are posted on ONW's website ([www.monw.org](http://www.monw.org)).

**Phase II** of the Nursing Education Barriers Identification Survey Project began in the fall of 2003. A state-wide, multi-organizational task force was established to develop strategies to ameliorate the barriers identified in *Phase I*. Task force members were solicited from various stakeholders such as Deans and Directors, hospital CEO's, and leaders from the MS Department of Education, the Rural Health Association, MS Hospital Association, MS Board of Nursing, MS Nurses' Association, and MS Board of Trustees of State Institutions of Higher Learning staff.

The Barriers Task Force created four sub-groups to facilitate the work. Each sub-group met over the 2003-2004 fiscal year and made recommendations on ways to reduce the barriers identified in the *Phase I* Study. The four sub-groups formed were entitled:

- Financial
- Life Demands
- Student Preparation
- Retention/Attrition

The Financial sub-group focused on problems such as lack of participation of all schools of nursing in Workforce Investment Act (WIA) funding opportunities, lack of funding for indirect educational expenses, difficulty navigating the financial aid process and lack of availability/funding for dependent day care. The Life Demands sub-group dealt with the problem of student difficulty in managing time and money, and lack of health care and insurance coverage.

Student Preparation sub-group work focused on problems related to pre-nursing students' lack of preparation in math and sciences, unrealistic expectations of nursing school, lack of awareness of factors that influence success in nursing school, and the feasibility of requiring a Certified Nursing Assistant (CNA) course prior to admission. Retention/Attrition sub-group worked on developing a standard definition of attrition among Mississippi schools of nursing and the lack of awareness of resources available to promote student success.

Recommendations from the Task Force include, but are not limited to the following:

- Analyze attrition data collected by Deans and Directors.
- Present findings and strategies developed to Deans and Directors/faculty and other stakeholders.
- Conduct workshop for nursing faculty on teaching and testing strategies, intergenerational issues, and values clarification.
- Develop and maintain website to include support services for students, faculty, and employers.
- Conduct research to measure the impact of Barrier strategies on student attrition rates in BSN and AD programs.
- Identify best practices within schools of nursing that have low attrition rates and high pass rates on NCLEX – Develop Model to be replicated.

Recruitment efforts have been very successful with some schools of nursing reporting long waiting lists and turning away qualified applicants. Recruitment efforts will continue to maintain the pipeline of nursing school applicants. An example of an effort to recruit minority and high-risk students is the High School Nurse Academy Mentorship Project. ONW and the Meridian Public School District Vocational Work Adjustment Project/GED Program (Workforce Investment Area) began collaboration on a project aimed at high school youth with career interests in the healthcare field, especially nursing. The project, called the *Meridian WIA Student Nurse Academy* (Academy), began November 2003, with the selection of 20 students from Meridian High School and the Meridian WIA GED program. The program was piloted at Rush Foundation Hospital in January 2004. Partners in this project included Meridian High School, the Meridian Public School District, Rush Hospital, the Twin Districts Workforce Investment Area (Meridian Vocational Work Adjustment Project/GED Program), the Mississippi Development Authority, the Office of Nursing Workforce, and Meridian Community College (Certified Nurse Assistant Program).

Students participating in the Academy were given the opportunity to see firsthand what it would be like to work in a hospital/healthcare environment. The students received tutoring, mentoring, life skills training, and a basic knowledge of medical terminology and nursing skills. The last month of the program was dedicated entirely to a Certified Nurse Assistant (CNA) program.

The program had a 100% success rate with all 20 students completing the Academy. Sixteen of the 18 CNA students took the state certification examination. All 16 of the CNA students passed the written portion of the exam. Nine of the 16 have completed the entire certification process and are now Certified Nurse Assistants. Three are currently employed as CNAs in a healthcare facility and all 16 are enrolled in a pre-

healthcare curriculum. Geographic target areas for expansion of the project include the Mississippi Delta, south-central, and the northern regions of the State.

The ONW website ([www.monw.org](http://www.monw.org)) contains documents and reports related to ONW research and projects, including The Mississippi Competency Model, the Southern Regional Education Board (SREB) Council on Collegiate Education for Nursing Survey, ONW's Nursing Faculty and Workforce Report to the Mississippi State Department of Health State Health Plan, Nursing Workforce Trends, and the Executive Summary for Barriers to Nursing Education. ONW provides this information to state agencies, employers, and policy-makers for strategic planning and initiative development, and to other states for assistance in their workforce projects.

Governor Haley Barbour, U.S. Assistant Secretary of Labor Emily Stover DeRocco and Senior Vice-President of Strategic Policy Planning of the American Hospital Association Workforce Commission Dr. James Bentley were speakers at the *Healthcare Workforce Summit: Accepting the Challenge*. The Mississippi Office of Nursing Workforce and the Mississippi Development Authority were co-sponsors of the summit to address the effect of Mississippi's healthcare workforce shortage on economic development within the state.

The Summit was a stimulus for the development of partnerships between private industry, governmental, non-profit and faith-based organizations to lower the attrition rates at Mississippi schools of nursing and allied health programs. Invited guests included state legislators, the executive staffs of Mississippi hospitals, the executive staff and board members of Mississippi's Institutions of Higher Learning, members of the Mississippi Board of Education, and other state officials.

In addition to numerous presentations, ONW has co-sponsored workshops with MS Hospital Association, MS Rural Health Association, and the MS Nurses Association. ONW has had two poster presentations accepted by the American Organization of Nurse Executives (AONE) to be presented at the annual convention in April 2005.